

## Video Gaming Device **Shipment Notification**

Louisiana Department of Revenue Office of Charitable Gaming P.O. Box 98502 Baton Rouge, LA 70884-9502 Phone: 1-800-562-9235

www.ocg.louisiana.gov

This form must be submitted to the Office of Charitable Gaming at least three (3) working days prior to the date of shipment. The devices must be shipped within ten (10) days of receiving approval from the Office. Use a separate form for each destination address. Attach additional pages if necessary. This approved form must be in the possession of the carrier during shipment of the listed devices.

Shipping Information:						
Manufacturer / Distributor						License Number
Physical Address (Street, City, State, Zip Code)						Proposed Shipping Date
Carrier / Mode of Transportation						Man./Dis. FAX #
Official's Name (Print)	Signature			Date	Daytime Phone Number	
Receiver / Destination Information:						
Manufacturer / Distributor						License Number
Physical Address (Street, City, State, Zip Code)						Expected Arrival Date
Gaming Device Information:						
Manufacturer	Serial N	umber	Model Nu	ımber	Description	
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
Do not write below this line. For office use only.						
☐ Approved ☐ Denied						
Signature of authorized personnel						Date